U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND **EMPLOYEE REPORT**

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

ı	For Official Other Endy Rec'd 7
Ē	ONS DROP

Name Dean

1. File Number U - 134 54

3. Name and address of person filing.

M Tamburri

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2. Fiscal Year Covered From:

1 / 1 / 2005 Through: 12 / 31 / 2005

4. Name, file number, and address of labor organization.

Labor Organization File Number 047-525

Name Laborers' Local 17

P.O. Box, Bldg., Room No., if any		P.O. Box, Building and Room Number, if any		
Street 87 Holmes Road		Street 451A Little Britain Road		
City Newburgh		City Newburgh		
State New York	ZIP Code + 4 1.2550	State New York	ZIP Code + 4 12550	
5. Position in labor organization. Field Representative, Ex. Board				
Enter appropriate data below	r If, during the past fiscal year, you or your s (except as specified in the ex	spouse or minor child directly or indirect (clusions set forth in the instructions):	ly had any of the following interests	
A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.				
6. Name and address of Employer (including trade name, if any).		7.a, Nature of Interest, Transaction.	, or Income.	
Name N/A				
Trade Name, if any:				
P.O. Box, Bldg., Room No., if any				
		7.b. Amount.		
Street				
City				
State	ZIP Code + 4			
	s	ignature		
submitted in this report (includ undersigned's knowledge and	on. The undersigned declares, under penalty ling the information contained in any accomp belief, true, correct, and complete. (See the	eanying documents), has been examined e section on penalties in the instructions.	by the signatory and is, to the best of the	
Form LM-30 (2003)			Page 1 of 2	

Name of Person Filing Dean Tamburri	File Number U-				
B. Held an Interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.					
8. Name and address of Business (including trade name, if any).	9. Business deals with:				
Name	,				
Trade Name, if any:	a. Labor Organization b. Trust				
P.O. Box, Bidg., Room No., if any	c. Employer				
Street					
City					
State ZIP Code + 4					
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.				
Name Laborers' Local 17 LECET	Laborers' Employers Cooperation Trust Fund purchased Tickets to various Golf Outings that I attended				
Trade Name, if any:	throught the year. The Outings purpose, were fund raisers or to promote Union Labor.				
P.O. Box, Bldg., Room No., if any					
Street 451B Little Britain Road	11.b. Approximate dollar value of such dealing.				
City Newburgh	12.a. Nature of interest held or income received.				
State New York ZIP Code + 4 12550	Attended Golf Outings				
	12,b. Amount.	\$1,200			
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.					
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.				
Name N/A					
Trade Name, if any:					
P.O. Box, Bldg., Room No., if any					
Street	,				
City					
State ZIP Code + 4					
13.b. Is the Business an Employer or Consultant?	14.b. Amount of payment.				